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24 OCT 2005

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHAT20057 US

| 11A12000 00  |  |  |  |  |
|--|--|--|--|--|
| 10/525198  |  |  |  |  |
| As a below named inventor, I hereby declare that:  |  |  |  |  |
| My residence, post office address and citizenship are as stated next to my name.   |  |  |  |  |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention the specification of which (check only one item below): |  |  |  |  |
| x entitled: PERSONAL CARE APPARATUS WITH AN AUTOMATICALLY PIVOTABLE HEAD PART  |  |  |  |  |
| is attached hereto.  |  |  |  |  |
| was filed as United States application   |  |  |  |  |
| Serial No.:  |  |  |  |  |
| On   |  |  |  |  |
| and was amended  |  |  |  |  |
| on   |  |  |  |  |
| ⊠ was filed as PCT international application   |  |  |  |  |
| International Application Number: PCT / IB2003 / 003957  |  |  |  |  |
| On International Filing Date: 29 August 2003   |  |  |  |  |

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

(if applicable).

and was amended under PCT Article 19

on

| COUNTRY | APPLICATION NUMBER | DATE OF FILING<br>DAY, MONTH, YEAR | PRIORITY<br>CLAIMED<br>UNDER 35 USC<br>119 |
|---------|--------------------|------------------------------------|--|
| EP      | 02 102 321.3       | 06-09-2002                         | YES  |
|         |                    |                                    |  |

Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number **PHAT20057 US** (includes Reference to PCT International Applications) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 SECOND GIVEN NAME **FAMILY NAME** FIRST GIVEN NAME **FULL NAME** OF **KOSTNER** <u>Johannes</u> **INVENTOR** COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY 201 RESIDENCE CITY Liebenfels **Austria Austria CITIZENSHIP** POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY **ADDRESS** Rosenbichl 10 A-9556 Liebenfels **Austria FULL NAME FAMILY NAME** FIRST GIVEN NAME SECOND GIVEN NAME OF **KAUER** Gerald INVENTOR RESIDENCE CITY STATE OR FOREIGN COUNTRY **COUNTRY OF CITIZENSHIP** 202 Ferlach<sup>1</sup> **Austria Austria** CITIZENSHIP POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE CITY **ADDRESS** Unterferlach 19 A-9170 Ferlach **Austria** SECOND GIVEN NAME **FULL NAME** FAMILY NAME FIRST GIVEN NAME OF Michael JANNY **INVENTOR** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 203 RESIDENCE Klagenfurt` **Austria Austria CITIZENSHIP** STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS CITY **ADDRESS** Mozart Strasse 90/3/7 A-9020 Klagenfurt **Austria** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 202 SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 201

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office (July 1994)

DATE